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Bib Data Sheet

<b>SERIAL NUMBER</b> 09/591,706	<b>FILING DATE</b> 06/09/2000 <b>RULE</b> -	<b>CLASS</b> 600	<b>GROUP ART UNIT</b> 3737	<b>ATTORNEY DOCKET NO.</b> MDS-012
<b>APPLICANTS</b> ROBERT NORDSTROM, HANOVER, MA ; DAVID BEE, GROTON, MA ; MARK MODELL, NATICK, MA ; ZE'EV HED, NASHUA, NH ; JENNIE KWO, CAMBRIDGE, MA ; MATTHEW EMANS, BOSTON, MA ;				
<b>** CONTINUING DATA *****</b> THIS APPLICATION IS A CIP OF 60/138,235 06/09/1999 * WHICH IS A CIP OF 09/481,762 01/11/2000 * WHICH CLAIMS BENEFIT OF 60/115,373 01/11/1999 WHICH IS A CIP OF 09/241,806 02/02/1999 WHICH IS A CIP OF 08/782,936 01/13/1997 PAT 6,104,945 (*) Data inconsistent with PTO records.				
<b>** FOREIGN APPLICATIONS *****</b> none sfb				
<b>IF REQUIRED, FOREIGN FILING LICENSE</b> <b>GRANTED ** 08/03/2000</b>				
<b>Foreign Priority claimed</b> <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <b>35 USC 119 (a-d) conditions</b> <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after <b>met</b> <b>Verified and</b> <b>Acknowledged</b> <b>Allowance</b> sfb <b>Examiner's Signature</b> <b>Initials</b>		<b>STATE OR COUNTRY</b> MA	<b>SHEETS DRAWING</b> 5	<b>TOTAL CLAIMS</b> 20 <b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> 021323				
<b>TITLE</b> Optical probe accessory device				
<b>FILING FEE RECEIVED</b> 899	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	